

The Inferno
Volunteer Waiver, Liability Release, Medical Consent, and Image Release

READ THIS DOCUMENT CAREFULLY BEFORE SIGNING. SIGNING THIS DOCUMENT WILL AFFECT YOUR LEGAL RIGHTS AND TERMINATE YOUR ABILITY TO BRING FUTURE LAWSUITS.

Initial each line after carefully reading and understanding it. You must initial each line and provide your signature in order to volunteer for **The Inferno**. The Inferno is a 13.1 mile extreme obstacle course adventure challenge.

___ 1. I understand that participation as a volunteer for The Inferno is inherently dangerous and may result in my injury or death.

___ 2. There will be challenging obstacles along The Inferno course, including but not limited to, water hazards, climbing, swimming, ropes to climb, heavy lifting, and running on rough terrain. I know that these obstacles and the competitive nature of The Inferno create risks for volunteers, including but not limited to collisions with participants and spectators, falls, effects of weather, and the negligence of individuals involved in The Inferno. I knowingly and freely assume and accept all risks, both known and unknown, including injury and death.

___ 3. I am at least 18 years old.

___ 4. I represent and warrant that I am physically able to safely volunteer for The Inferno and am free of any medical condition that may hinder my safe participation as a volunteer.

___ 5. In the event of my injury, I agree that The Inferno, LLC officials may authorize emergency treatment and/or transportation on my behalf, and I assume all responsibility for all costs of emergency treatment and transportation.

___ 6. I understand that it is my responsibility to purchase sufficient insurance to cover any injury, death, or personal liability which may occur in connection with my participation as a volunteer for The Inferno.

___ 7. I understand that as a volunteer I do not have permission to participate in The Inferno. Any attempt to participate will result in my immediate removal from the The Inferno grounds, and The Inferno, LLC will not be held responsible or liable for any injuries I sustain while wrongfully participating.

___ 8. Having read this **waiver**, and in consideration of being permitted to volunteer for The Inferno, I, for myself and on behalf of my heirs, assigns, and personal representatives, waive, release, and discharge The Inferno, LLC, owners, members, officers, employees, contractors, volunteers, insurers, sponsors, advertisers, suppliers, and agents from all liability, including liability arising from the negligence of persons named in this waiver, with respect to any injury, disability, death, loss and/or damage to property, incurred by me as a result of my participation in The Inferno.

___ 9. I understand that all photographs, videos, or other images of me taken by The Inferno, LLC, its agents, or contractors are the sole property of The Inferno, LLC. I grant permission to The Inferno, its agents, or contractors, to use any such images for any valid purpose, including but not limited to, advertising, marketing, and promotion. I understand that I will not be compensated for any such use.

___ 10. I acknowledge that **I HAVE BEEN WARNED**.

I HAVE READ AND FULLY UNDERSTAND THE TERMS OF THIS WAIVER, LIABILITY RELEASE, MEDICAL CONSENT, AND IMAGE RELEASE. I AM FREELY AND VOLUNTARILY SIGNING THIS AGREEMENT, AND UNDERSTAND THAT BY SIGNING IT I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS.

Name: _____ Signature: _____ Date: _____

Emergency Contact Name: _____ Phone number: _____